



Ketchikan Gateway Borough

Non-profit Relief and Recovery Grant Application - Round 2

Section 1 - Applicant Information

Non-profit name:

Contact name:

Contact mailing address:

Contact phone number:

Contact email address:

Physical address of non-profit:

Location of offices in Ketchikan:

Number of staff in Ketchikan:

IRS Taxpayer Identification Number (TIN):

Total revenue as listed on the organization's most recent IRS tax filing:

Check which type of IRS certification your non-profit holds:

- 501(c)(3) Charitable Organization
 501(c)(4) Social Welfare
 501(k) Childcare organization
 Other (please specify)

(Faith-based non-profits are eligible, so long as they provide services that are promoted and available to the general public without regard to religious affiliation. Non-profit organizations "that are principally engaged in teaching, instructing, counseling, or indoctrinating religion or religious beliefs, whether in a religious or secular setting, or primarily engaged in political or lobbying activities" are not eligible (as per 13 CFR) 120.110(k) in the Code of Federal Regulations.)

Did your non-profit provide services to residents of the Ketchikan Gateway Borough in 2019?
Please describe the services provided in Ketchikan with specific information on the number of individuals served and the impact of your organization on the community:

Yes No

Section 2- Grant Request Information

What is the grant amount you are requesting? (Maximum \$20,000)

The application period opens August 20, 2020 and closes September 21, 2020.

Applications may be submitted by email to: mgroffice@kgbak.us or hand-delivered or mailed to:
KGB Manager's Office, Suite 210, 1900 First Avenue, Ketchikan, AK 99901.

Borough Use
Only

GL Code: 730-10-005-6080

Approved
Amount:

Approval:

Date:

Were the services provided by your non-profit organization impacted by the COVID-19 public health emergency and are you in need of economic assistance?

Yes

No

Briefly describe how the non-profit's services have increased or been impacted by COVID-19 and how the funds will be utilized. Provide specific financial information about direct economic losses or costs incurred as a result of the pandemic. *Impacts may include, but are not limited to, loss of revenue due to mandatory shutdown measures, additional operating expenses due to providing additional COVID-19-related services, additional operating expenses of reopening and protecting staff and the public, including funds already spent for those purposes.*

Has your non-profit received supplemental funding as a result of the pandemic?

If yes, please explain how much was received and how it was utilized:

Yes

No

Are any additional matching grant funds available as a result of this grant application?

If yes, please explain below:

Yes

No

Has your organization received a Qualified Opinion on an audit or review?

If yes, please explain:

Yes

No

**Final expenditures must be completed by December 30, 2020.
Grant reports are due to the Borough by January 31, 2021.**

Applications may be amended before the deadline of September 21, 2020. Incomplete applications will be rejected. Applicants will be notified of the status of their application via email to the contact person listed on the application. If the demand for grants exceeds the Borough's available funds, the Borough reserves the right to adjust award amounts equally to stay within available funding. The grant funds received by a non-profit must be fully expended by December 30, 2020, after which grant recipients are required to submit a one-page narrative grant report to the Borough of how the funds were used, by a deadline of January 31, 2021.

Section 3 - Sign and Certify

I certify that the non-profit listed herein has been negatively impacted by (check ALL that apply):

- the COVID-19 pandemic
- the State-mandated closure of certain organizations
- voluntary closure of the organization to promote social distancing
- decreased revenue due to the pandemic
- other actions taken to prevent the spread of the virus
- increased demand for services as a result of the pandemic

I understand that the application is public record. I further certify that I am: 1. a principal officer, general partner, or owner of the named organization 2. authorized to apply on the behalf of the organization and 3. all of the information provided herein is true and accurate. I understand that I may be required to return any grant funds awarded based on false or inaccurate information.

As an official signer of the application, I certify that the information provided in this application is true and accurate and acknowledge that the funds will be spent by the required deadline of December 31, 2020. I agree to assist in the verification of information provided in this application and to provide additional information to the Borough, if requested.

Signed: _____ **Date:** _____

Printed Name: _____ **Title:** _____

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